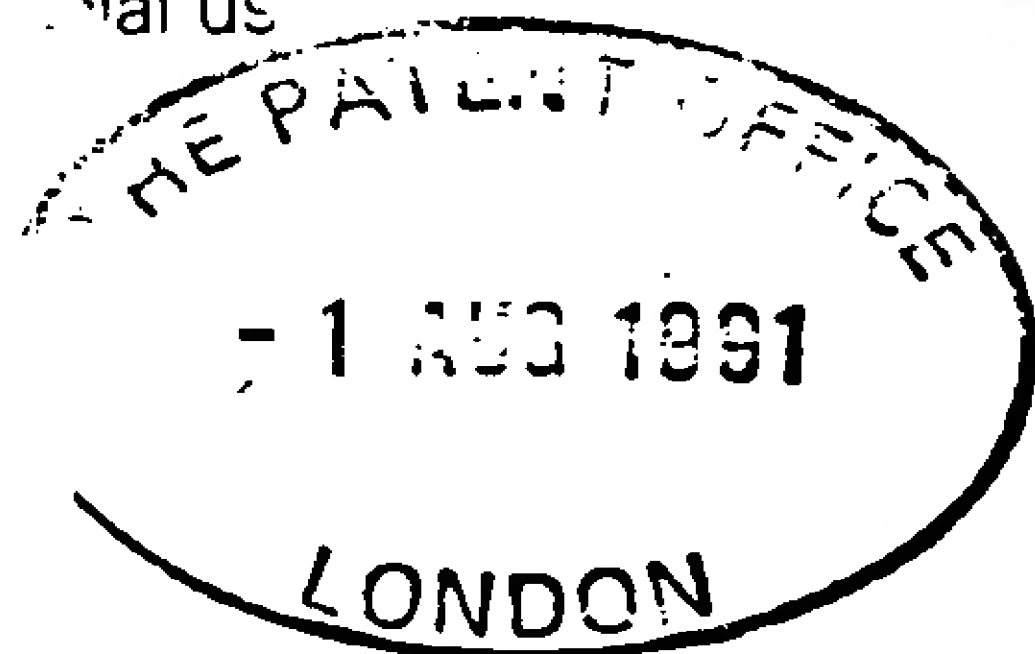


For completion by the applicant



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Notes

Please type, or write in dark ink using CAPITAL letters. A prescribed fee is payable for a request for grant of a patent. For details, please contact the Patent Office (telephone 071-829 6910).

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Request for grant of a Patent

Form 1/77

Patents Act 1977

1 Title of invention

1 Please give the title of the invention PRODUCTION OF ANTIBODIES

2 Applicant's details

☐ First or only applicant

2a If you are applying as a corporate body please give:

Corporate name
THE WELLCOME FOUNDATION LIMITED

Country (and State of incorporation, if appropriate) UK

2b If you are applying as an individual or one of a partnership please give in full:

Surname
Forenames

2c In all cases, please give the following details:

Address Unicorn House
160 Euston Road
London NW1 2BP
England

UK postcode (if applicable) NW1 2BP

Country UK

ADP number (if known)

1693005